

RV DEC 1 2000



## THE ROCKEFELLER FOUNDATION

420 Fifth Avenue, New York, NY 10018

DEC 1 2000

## MATCHING GIFT APPLICATION

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Greensphere, Inc.

NAME OF GIFT RECIPIENT

119-42 80<sup>th</sup> Road

ADDRESS

Kew Gardens, NY

CITY/STATE

AMOUNT \$ 7,500 -

10/20/2000

DATE OF GIFT

\$ 2,500.00

AMOUNT OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☐ RESTRICTED: ☐

Anthony &amp; Cheryl McIlwan

PRINTED NAME OF CONTRIBUTOR

SIGNATURE OF CONTRIBUTOR

Part II: To be completed by the organization. **IMPORTANT:** Please attach to the completed application a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(13), and mail the *entire* form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 2,500. was received on 10-21-2000

DATE

by Green Sphere Inc. and that I have read, and will ensure our organization's

NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

FRANK MELLI

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

DEC 15 2000

Frank Melli

SIGNATURE

FOR FOUNDATION USE ONLY:


Lynda Muller

CORPORATE SECRETARY

12/5/00

DATE

FROM: PORTUQUE OFFICE FAX TEL: 718-268-6076 Dec. 01 2008 (4/14/08) RI  
 210 878 4430 TO: DIRECTOR, NEW YORK STATE DEPT. OF TAXATION

	<b>THE ROCKEFELLER FOUNDATION</b> 420 Fifth Avenue, New York, NY 10018
	<b>MATCHING GIFT APPLICATION</b>

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

114-42 83<sup>rd</sup> Ave  
 ADDRESS

New Gardens, NY  
 CITY/STATE

11475  
 ZIP CODE

\$3,500.00  
 AMOUNT OF GIFT

Dec-1-06  
 DATE OF GIFT

PURPOSE OF GIFT: (UNRESTRICTED) ☒ RESTRICTED: \_\_\_\_\_

Anthony and Cheryl McEwen  
 PRINTED NAME OF CONTRIBUTOR

*Anthony McEwen*  
 SIGNATURE OF CONTRIBUTOR

Part II: To be completed by the organization. **IMPORTANT:** Please attach to the completed application a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(12), and mail the *entire* form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$3,500.00 was received on 12-1-06  
 Date

by Green Sphere Inc. and that I have read, and will ensure our organization's  
 Name of Organization (PLEASE USE CORPORATE NAME)

compliance with the conditions of the Matching Gift Program described on the reverse side of this application.

*Frank Melli*

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
 CHIEF DEVELOPMENT OFFICER, OR TREASURER

*Frank Melli*

SIGNATURE

FOR FOUNDATION USE ONLY:

*Lyndon Muller*  
 CORPORATE SECRETARY

12/5/07  
 DATE

PAID RI  
 MATCHED  
 07-Dec-08  
 BOUNT 3,500

Vendor ID (GREEN0002)	Vendor Name GREEN SPHERE INCORPORATED	Date December 15, 2000	Document No. 126820
Invoice No. CH:10/21/00 CV:12/1/00	Date 12/7/00	PO# 12/7/00	Description 3-1 BATCH: A. AND C. MCLEWAN 3-1 BATCH: A. AND C. MCLEWAN
			Amount \$7,500.00 \$10,500.00
TOTAL:			\$18,000.00

TERESA C. SILVA


TEL NO. 1212-8625031

Nov. 26, 0 11:48 P.M.

FAX BY 2041 11:50 PM NOVEMBER 2001

212 862 0439 TO 91718548800

P.02483

	<b>THE ROCKEFELLER FOUNDATION</b> 420 Park Avenue, New York, NY 10018	
	<b>MATCHING GIFT APPLICATION</b>	
	Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.	

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.  
 NAME OF ORGANIZATION

86-02 Park Lane South \*635 AMOUNT \$ 11421 9000  
 ADDRESS CITY/STATE ZIP CODE

\$ 3,000  
 AMOUNT OF GIFT

3/15/01  
 DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: ☐

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

CMC Ewan  
 PRINTED NAME OF CONTRIBUTOR

[Signature]  
 SIGNATURE OF CONTRIBUTOR

Part II: To be completed by the organization. **IMPORTANT:** Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 3,000 was received on 3/15/01  
 DATE

by GREEN SPHERE INC. and that I have read, and will ensure our organization's  
 ORGANIZATION NAME (PLEASE USE CORPORATE NAME)

compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

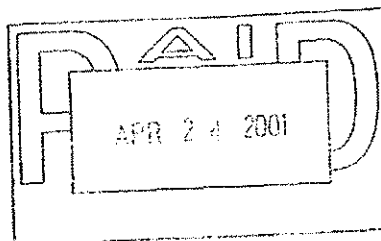
FRANK MELLI  
 PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
 CHIEF DEVELOPMENT OFFICER, OR TREASURER

[Signature]  
 SIGNATURE

RECEIVED BY: <u>[Signature]</u> DATE: <u>4/2/01</u>
--

Linda Muller

4/2/01



Vendor ID (GREN0002)	Vendor Name GREEN SPHERE INCORPORATED	Date April 24, 2001	Document No. 129921
Invoice No. CR:3/15/01	Date 3/15/01	Description 3-J MATCH: CHERLY ROSEMAN	Amount \$9,600.00
TOTAL:			\$9,600.00

307112

TERESA C. SILVA

TEL. No. 1212-8623031

Mar. 5, 1 6:11 P.02

	<b>THE ROCKEFELLER FOUNDATION</b> 420 Fifth Avenue, New York, NY 10018
	<b>MATCHING GIFT APPLICATION</b>
	Part I. To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Part I. To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

86-02 Park Lane South, #6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 5,000.00

AMOUNT OF GIFT

6/30/2001

DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: ☐

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl McEwan  
 PRINTED NAME OF CONTRIBUTOR

Ed McEwan  
 SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 5,000.00 was received on 6/30/01

by GREEN SPHERE INC. and that I have read, and will ensure our organization's compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

FRANK MELLI  
 PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
 CHIEF DEVELOPMENT OFFICER, OR TREASURER

Frank Melli  
 SIGNATURE

FOR FOUNDATION USE ONLY:

LYNDA MULLEN

CORPORATE SECRETARY

DATE

\*+ TOTAL PAGE NO. 41

JUL 11 2001 12:24

1212 8623031

PAGE 02

Vendor ID  
(GREG0002)

Vendor Name  
GREEN SPHERE INCORPORATED

Date  
July 10, 2001

Document No.  
131010

Invoice No.  
CM:6/30/01

Date PO#  
6/30/2001

Description  
3-18ATCH: CHERLY MCENAN

Amount  
\$15,000.00

\$15,000.00

TOTAL:



TERESA C. SILVA

TLI No. 1212-8623031

May 5, 1 7:20 P.01



# THE ROCKEFELLER FOUNDATION

420 Fifth Avenue, New York, NY 10018

## MATCHING GIFT APPLICATION

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

PAID P.O. #

BATCH NAME Match 21 SEP 01

AMOUNT \$ 15,000

86-02 Park Lane South, #6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 5,000.00

AMOUNT OF GIFT

9/1/2001


DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: ☐

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl and Anthony McEwan

PRINTED NAME OF CONTRIBUTOR

  
SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 5,000.00 was received on 9/1/2001 DATE

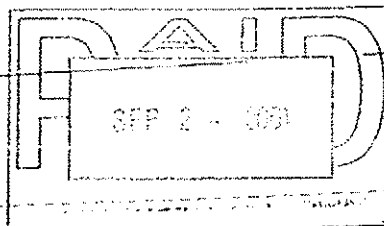
by Green Sphere Inc. and that I have read, and will ensure our organization's compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

Frank Melli

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

  
SIGNATURE

FOR FOUNDATION USE ONLY:

  
CORPORATE SECRETARY


9/21/01

DATE

\*\* TOTAL PAGE 01 \*\*

SEP 18 2001 13:34

1212 8623031

PAGE 01

Vendor ID (PRE)002)	Vendor Name GREEN SPHERE INCORPORATED	Date September 24, 2001	Document No. 133438
Invoice No. (M:9/1)/01	Date 9/1/01	Description 3-1 MATCH: CHERLY MCENAN	Amount \$15,000.00
TOTAL:			\$15,000.00


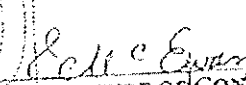
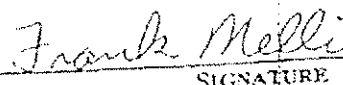
NOV-30-2001 15:05

MAIL ROOM

NOV 30 2001 12:12 PM ROCKEFELLER

212 652 8419 TO 212192466243

P.01/01

 <b>THE ROCKEFELLER FOUNDATION</b> 420 Fifth Avenue, New York, NY 10018 <b>MATCHING GIFT APPLICATION</b>	
Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.	
Green Sphere, Inc. NAME OF GIFT RECIPIENT	
86-02 Park Lane South, #6B5 ADDRESS	Woodhaven, NY CITY/STATE
	11421 ZIP CODE
\$ 5,000.00 AMOUNT OF GIFT	11/29/2001 DATE OF GIFT
PURPOSE OF GIFT: UNRESTRICTED: <input checked="" type="checkbox"/> RESTRICTED: <input type="checkbox"/>	
I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.	
Cheryl and Anthony McEwan PRINTED NAME OF CONTRIBUTOR	 SIGNATURE OF CONTRIBUTOR
<b>PART II:</b> To be completed by the organization. <b>IMPORTANT:</b> Please attach to the completed application (1) a record of the donation e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.	
I hereby certify that the gift described above, in the amount of \$ <u>5,000.</u> was received on <u>11-29-01</u> DATE	
by <u>GREEN SPHERE INC.</u> and that I have read, and will ensure our organization's compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.	
<u>FRANK MELLI</u> PRINTED NAME OF CHIEF EXECUTIVE OFFICER, CHIEF DEVELOPMENT OFFICER, OR TREASURER	 SIGNATURE
<b>FOR FOUNDATION USE ONLY:</b> <u>Lynnda Muller</u> CORPORATE SECRETARY	
DATE <u>11/30/01</u>	

NOV 30 2001 15:05

No check copy needed per P. Bethel 11/30/01  
 as Exception

718 441 8449

 TOTAL CODE 01 22  
 TOTAL P.01  
 PAGE.01


Vendor ID (GREEN002)	Vendor Name GREEN SPHERE INCORPORATED	Date December 5, 2001	Document No. 13462
Invoice No. EM1125/01	Date 12/4/2001	PO# PO#	
		Description 3 TO 1 WATCH, CHEROKEE MEDIAN	Amount \$15,000.00
			<u>\$15,000.00</u>
			TOTAL:

REC-01-02 12:14 PM

FEB 27 2002 12:41 PM ROOMFILLER

212 652 8439 TO 917185068676

P.02/02

	<b>THE ROCKEFELLER FOUNDATION</b> 420 Fifth Avenue, New York, NY 10018	
	<b>MATCHING GIFT APPLICATION</b>	

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

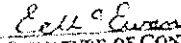
NAME OF GIFT RECIENT

86-02 Park Lane South, #6B5  
ADDRESSWoodhaven, NY  
CITY/STATE11421  
ZIP CODE\$ 7,500.00  
AMOUNT OF GIFT2/27/2002  
DATE OF GIFTPURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: \_\_\_\_\_

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl McEwen

PRINTED NAME OF CONTRIBUTOR

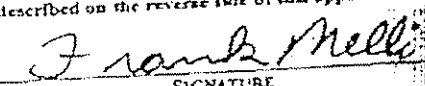
  
 SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation -- e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 7,500, was received on 2/27/02

 and that I have read, and will ensure our organization's compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

FRANK MELLI

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER
  
 SIGNATURE

FOR FOUNDATION USE ONLY:

LYNDA MULLEN

CORPORATE SECRETARY

March 5, 2002  
DATE

MAR - 7 2002

PAID P.O. #

BATCH NAME RUSH MATCH #12

AMOUNT \$ 22,500.00

FEB 28 2002 12:17

PAGE 01

Vendor ID  
(GREH0002)  
Invoice No.  
CM:2/27/02

Vendor Name  
GREEN SPHERE INCORPORATED  
Date PO#  
2/27/2002

Date  
March 7, 2002  
Description  
3-1 MATCH: CHERYL HCEWAN

Document No.  
136986

Amount
\$22,500.00
\$22,500.00

TOTAL:



# THE ROCKEFELLER FOUNDATION

420 Fifth Avenue, New York, NY 10018

JUN 12 2002

## MATCHING GIFT APPLICATION

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

DATE FOR Match 14-JUN-02	AMOUNT: \$ 9,000-
GR/FLP	

86-02 Park Lane South, 6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 3,000.00

AMOUNT OF GIFT

6/1/2002

DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: ☐

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl McEwan  
PRINTED NAME OF CONTRIBUTOR

Cheryl McEwan  
SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 3,000 was received on 6/4/02  
DATE

by Green Sphere Inc. and that I have read, and will ensure our organization's  
NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

Frank Melli

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

Frank Melli  
SIGNATURE

FOR FOUNDATION USE ONLY:

LYNDA MULLEN

CORPORATE SECRETARY

JUN 11 2002  
DATE

Vendor ID (GREEN0002)	Vendor Name GREEN SPHERE INCORPORATED	Date June 19, 2002	Document No. 136823
Invoice No. GM: 6/4/02	Date 6/4/2002	Description 3-1 MATCH: CHERLY MCEWAN	Amount \$9,000.00
TOTAL:			\$9,000.00



FROM: Green Sphere, Inc.

FAX NO.: 718 846-6243

Jan. 31 2003 01:25AM P5

FEB 26 2003



## THE ROCKEFELLER FOUNDATION

420 Fifth Avenue, New York, NY 10018

FEB - 6 2003

## MATCHING GIFT APPLICATION

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

Match 27-Feb-03

\$ 15,000-

86-02 Park Lane South, 6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 5,000.00

AMOUNT OF GIFT

1/20/2003

DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED:

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl McEwan  
PRINTED NAME OF CONTRIBUTOR

Cheryl McEwan  
SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 5,000. was received on 1/20/03  
DATE

by GREEN SPHERE INC. and that I have read, and will ensure our organization's  
NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

FRANK MELLI  
PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

Frank Melli  
SIGNATURE

FOR FOUNDATION USE ONLY:

Lyndon Miller  
CORPORATE SECRETARY

2/25/03  
DATE

DATE

Vendor ID  
(GREG0002)  
Invoice No.  
CMM: 1/20/03


Vendor Name  
GREEN SPHERE INCORPORATED  
Date PO#  
1/20/2003

Date  
March 3, 2003  
Description  
3-1 MATCH: CHERYL MCEWAN

Document No.  
142762

Amount
\$15,000.00
\$15,000.00

TOTAL:

CHERYL A. MCEWAN ANTHONY P. MCEWAN 149 - 39 - 257TH STREET PH. 718-723-2699 ROSEDALE, NY 11422		1-2 213	213
DATE 1/20/03			
PAY TO THE ORDER OF	<i>Green Sphere</i>	\$ 5,000	
<i>Five thousand 00/100</i>		DOLLARS	
 CHASE		The Chase Manhattan Bank 1501 Broadway New York, NY 10036	
MEMO	<i>Cell Ewan</i>		
⑆0210000210004381237⑈		2135	

FROM : Green Sphere Inc.

FRX NO. : 710 846-6243

Jun. 24 2003 09:14PM P2

	<b>THE ROCKEFELLER FOUNDATION</b> 420 Fifth Avenue, New York, NY 10018		JUN 30 2003 JUL 01 2003
	<b>MATCHING GIFT APPLICATION</b>		

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

Math01-Sch03 \$30,000-

 86-02 Park Lane South, 6B5  
 ADDRESS

 Woodhaven, NY  
 CITY/STATE

 11421  
 ZIP CODE

 \$ 10,000.00  
 AMOUNT OF GIFT

 6/14/2003  
 DATE OF GIFT

 PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED:

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

 McCowan  
 PRINTED NAME OF CONTRIBUTOR

 McCowan  
 SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation -- e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 10,000.00 was received on 6/14/03

by Green Sphere Inc. and that I have read, and will ensure our organization's

NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

FRANK MELLI

 PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
 CHIEF DEVELOPMENT OFFICER, OR TREASURER

 Frank Melli  
 SIGNATURE

FOR FOUNDATION USE ONLY:

 Lynda Mullen  
 CORPORATE SECRETARY

 6/30/03  
 DATE

Vendor ID  
(GREEN0002)  
Invoice No.  
CMM: 3/14/03

Vendor Name  
GREEN SPHERE INCORPORATED  
Date PO#  
6/14/2003

Date  
July 7, 2003  
Description  
3-1 MATCH: CHERYL MCCANN

Document No.  
144549

Amount  
\$30,000.00

TOTAL:

\$30,000.00

FROM : Green Sphere Inc.

FAX NO. : 718 846-6243

Jun. 24 2003 09:14PM P3

CHERYL MCEWAN  
BRANDON J. ANDERSON  
156-04 - 130 AVE. 718-753-2694  
ROCHDALE, NY 11434

6/14/03  
104

*Green Sphere*  
*Ten Thousand*

\$ 10,000

Washington Mutual

Gold  
Customer

*Cheryl*

0021222233 489029980 0104

FROM: GREEN SPHERE, INC.

FORM NO.: 718 846 6243

Feb. 09 2004 03:04PM P1



# THE ROCKEFELLER FOUNDATION

420 Fifth Avenue, New York, NY 10018

MAR 2 2004

## MATCHING GIFT APPLICATION

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

86-02 Park Lane South, 6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 1,400.00

AMOUNT OF GIFT

1/15/2004

DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED:

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

**PAID**

Cheryl &amp; Anthony McEwan

PRINTED NAME OF CONTRIBUTOR

BATCH

AMOUNT:

NAELOS-HAR-24  
GR/FLP

\$ 4,200.

*Cheryl Ewan*  
SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 1,400.00 was received on 1-15-04

by Green Sphere Inc. and that I have read, and will ensure our organization's compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

*Frank Melli*  
PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

*Frank Melli*  
SIGNATURE

FOR FOUNDATION USE ONLY:

*Linda M. Miller*  
CORPORATE SECRETARY

DATE

FROM: GREEN SPHERE INC.

FAX NO.: 718 846 6243

Feb. 09 2004 02:23PM P1



# THE ROCKEFELLER FOUNDATION

420 Fifth Avenue, New York, NY 10018

MAR 02 2004

## MATCHING GIFT APPLICATION

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

86-02 Park Lane South, 6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 1,100.00

AMOUNT OF GIFT

1/26/2004

DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: ☐

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl &amp; Anthony McEwan

PRINTED NAME OF CONTRIBUTOR

SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 1,100.<sup>00</sup> was received on 1-26-04  
DATE

by Green Sphere Inc. and that I have read, and will ensure our organization's  
NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

Frank Melli

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

SIGNATURE

FOR FOUNDATION USE ONLY:

CORPORATE SECRETARY

DATE  
Match MAR-04  
GR/FILE

AMOUNT  
\$ 3,300  
3/2/04

DATE



Vendor ID  
(GREN0002)

Vendor Name  
GREEN SPHERE INCORPORATED

Date  
March 8, 2004

Document No.  
147672

Invoice No.  
CMM:1/15/04  
CRM:1/26/04


Date PO#  
1/15/2004  
1/26/2004

Description  
3-1 MATCH: CHERYL McEWAN  
3-1 MATCH: CHERYL McEWAN

Amount  
\$4,200.00  
\$3,300.00

TOTAL:

\$7,500.00

	<b>THE ROCKEFELLER FOUNDATION</b> 420 Fifth Avenue, New York, NY 10018	JUN 16 2004
	<b>MATCHING GIFT APPLICATION</b>	

Part I: To be completed by the Foundation staff member or trustee requesting the matching gift. Please send this form, together with your gift, to the eligible organization.

Green Sphere, Inc.

NAME OF GIFT RECIPIENT

86-02 Park Lane South, 6B5

ADDRESS

Woodhaven, NY

CITY/STATE

11421

ZIP CODE

\$ 2,500.00

AMOUNT OF GIFT

6/14/2004

DATE OF GIFT

PURPOSE OF GIFT: UNRESTRICTED: ☒ RESTRICTED: ☐

I ATTEST THAT THE SOURCE OF FUNDS FOR THIS GIFT IS MY PERSONAL ASSETS, THAT I MADE THIS GIFT ON MY OWN BEHALF, AND THAT I RECEIVED NO BENEFIT IN RETURN.

Cheryl & Anthony McEwan

PRINTED NAME OF CONTRIBUTOR

SIGNATURE OF CONTRIBUTOR

PART II: To be completed by the organization. IMPORTANT: Please attach to the completed application (1) a record of the donation - e.g., a copy of the check and (2) a copy of the Department of the Treasury ruling confirming your organization's classification under Internal Revenue Code Section 501(c)(3) and 509(a)(1-3), and mail the entire form to the Corporate Secretary at the above address.

I hereby certify that the gift described above, in the amount of \$ 2,500. was received on 6/14/04 DATE

by Green Sphere Inc. and that I have read, and will ensure our organization's compliance with, the conditions of the Matching Gift Program described on the reverse side of this application.

NAME OF ORGANIZATION (PLEASE USE CORPORATE NAME)

Frank Melli

PRINTED NAME OF CHIEF EXECUTIVE OFFICER,  
CHIEF DEVELOPMENT OFFICER, OR TREASURER

Frank Melli

SIGNATURE

FOR FOUNDATION USE ONLY:

CORPORATE SECRETARY

DATE

Vendor ID (GREG0001)	Vendor Name GREEN SPHERE INCORPORATED	Date July 1, 2004	Document No. 149020
Invoice No. 41: 6/14/04	Date PO# 6/29/2004	Description 3-1 MATCH: CHERYL NCEWAN	Amount \$7,500.00
TOTAL:			\$7,500.00

CHERYL A. MCEWAN  
ANTHONY P. MCEWAN  
149 - 39 - 257TH STREET PH. 718-723-2659  
ROSEDALE, NY 11422


1-2  
210

2178

DATE 6/16/04

PAY TO THE ORDER OF *Green Issue*

*Two thousand five hundred* DOLLARS \$ 2,500

 CHASE The Chase Manhattan Bank  
1501 Broadway  
New York, NY 10036

MEMO

⑆0210000211004384237⑈

*Ed McEwan*

2178